

A600.6
W632
6:3

Texas

WIC NEWS

Special Supplemental Nutrition Program for Women, Infants and Children

March 1997
Volume 6, Number 3

**Studies show
improved
development
in breastfed
children**



Inside

**Proving your
program works**

**Mumps virus linked
to heart disease**

ECI referrals can help children reach potential

By Roxanne Robison, R.D., C.S., L.D.

Nutrition Consultant for Children with Special Health Care Needs

What can you do at the WIC clinic if a mother tells you that she is concerned because her 15-month-old is not yet walking? Another mother is concerned that her 9-month-old is not able to sit yet without assistance. Maybe a 10-month-old cannot hold her own bottle and does not seem to respond to sounds.

These concerns may indicate that the child has a problem with his or her development.

Intervening in first 3 years

In Texas, children younger than 3 who are suspected of having delays in development may be referred to an Early Childhood Intervention program.

When a child is referred to an ECI program for suspected developmental delay, a team of professionals will evaluate the child, at no cost to the family, to determine if the child is developmentally delayed and would therefore be eligible for services.

ECI was established in Texas 15 years ago and served as a model for the national program. It provides services to families with children who have disabilities or developmental delays. Studies have shown that intervention during the first three years of life increases the likelihood that a child will develop to his or her maximum potential.

Referrals to ECI

Some diagnoses make a child automatically eligible for ECI services because of the high probability of resulting developmental

delay. Examples of these conditions include Down's syndrome and other genetic disorders, cerebral palsy, seizure disorders, fetal alcohol syndrome, and vision and hearing impairments.

It is important to remember that the child does not need to have a definite diagnosis before a Texas WIC staffer can make a referral to ECI services. You only need to suspect that the child may have a problem.

In some cases, the cause of a child's developmental delay or disability is unknown. Regardless of the cause, early intervention services can help children reach their maximum potential and become as independent and as productive as possible.

ECI services

ECI services are provided as needed to the young client and to the client's family. Services offered to the ECI client include:

- ◆ Nutrition services.
- ◆ Physical, speech-language, and occupational therapies.
- ◆ Screenings and assessments in hearing and vision.
- ◆ Assistive technology.
- ◆ Activities to develop learning and eating skills, as well as social and emotional development.
- ◆ Supporting child care or preschool teaching of clients.
- ◆ Transportation to services.
- ◆ Home visits to develop individual service plans.

Family members of ECI clients usually receive:

- ◆ Education and counseling.
- ◆ Coordination of needed social and health services.
- ◆ Access to support groups.

Because nutrition services are offered at all ECI programs, ECI can be a resource for WIC clinics to access when individual nutrition counseling is needed for special conditions. Counselors at the WIC clinic may lack training in some areas, or the child may benefit from a team approach.

In your clinic work, have you ever seen a tube-fed child and wondered if anyone is trying to promote oral intake or language development in that child? This child may benefit from home visits by a nutritionist and an oral-motor feeding therapist from ECI.

Contacting ECI

If you are concerned about the cognitive, motor, communication, or social-emotional development of a child younger than 3, find the location of the nearest ECI program by consulting your local agency's copy of the directory of ECI services. Ideally, you could get to know the nutritionist at the ECI program in your area and consult with her or him as needed.

Information about the ECI program in Texas is also available through ECI's new toll-free line, (800) 250-2246.

For more information about ECI and caring for children with special health-care needs, call Roxanne Robison at (512) 458-7785.

Texas WIC News

Published monthly by the



Texas Department of Health
Bureau of Nutrition Services
1100 West 49th Street
Austin, Texas 78756
(512) 458-7532

Patti J. Patterson, M.D.
Commissioner of Health
Texas Department of Health

Carol S. Daniels, M.A.
Deputy Commissioner for Programs

Roy Hogan
Deputy Commissioner for Administration

Debra Stabeno
Associate Commissioner
Health Care Delivery

Scott Simpson, M.D.
Chief
Bureau of Clinical and Nutrition Services

Mike Montgomery
State WIC Director
Bureau of Clinical and Nutrition Services

Barabara Keir
Interim Division Director
Bureau of Clinical and Nutrition Services

Marsha Canright
Coordinator
Outreach & Marketing Section

Shelly Ogle
Editor

Callie Jones
Assistant Editor

Jennifer VanGilder
Photographer

John Koloen
Editorial Consultant

Linda Brumble, Laurie Coker,
Judith Cayton Devin, Carol Filer,
Marie Garland, Rachel Jule, John Koloen,
Nancy Liedtke, Roxanne Robison,
Janet Rourke, Lynn Silverman,
Jewell Stremler, Mary Van Eck
Contributing Writers

Health and Human Services
Printing Services
Printing

Students of Rosedale School
Mailing

WIC is an equal-opportunity program.
If you believe you have been discriminated
against because of race, color, national origin, age,
sex, or disability, immediately call the state WIC
office at 1-800-942-3678.

Texas

WIC NEWS

Government Publications

Special Supplemental Nutrition Programs for Women, Infants & Children

Volume 6, Number 3
MAY 16 1997

March 1997

Depository
Dallas Public Library

...in this issue

2 Children with developmental delays helped by ECI

4 Local Agency News

10 Training Express: Ensuring smooth-working process

11 Training videos provide solutions

12 Breastfeeding makes a difference in babies' development

14 Posters tested for World Breastfeeding Week

16 Nutrition Network: Learning through grocery tours

18 Mom to Mom: Referrals key to peer counselors' role

19 WICalendar

20 Covey series finale: Making effectiveness a habit

21 Health Facts: Mumps virus linked to heart damage

22 Et Cetera

23 Evaluation techniques that prove your program works

Cover: Studies show that breastfed babies have better development
outcomes than those of babies fed commercial infant formulas.
Cover photo by Best Start photographer Gordon Myhre.

Project 67

Corsicana-Navarro County WIC trains area's first breastfeeding peer counselors

The Corsicana-Navarro County WIC program arranged training Dec. 11-13 for Corsicana's first class of breastfeeding peer counselors. Cathy Liles, a breastfeeding trainer on contract with the state agency, led the training for the class of six students.

"A different local WIC vendor donated lunch and refreshments for the class each day, which made the schedule very convenient for the students and the staff," says Ginger Thomas, coordinator of Project 67's peer-counselor program. "Cathy's timely presentation was thorough, and all of our students are enthusiastic about the peer-counselor program."

About 40 people attended the training's graduation ceremony held at the Corsicana Library community room. The day's program was opened by the nursing director of the Corsicana-Navarro Public Health District, Emily Carroll, who had

been Project 67's first WIC director.

The graduation address was given by Donna McGahan, a certified nurse midwife from the county health department's prenatal clinic. She commended the graduates for their accomplishments and emphasized the need for their services.

Closing remarks were given by Pearl Reynolds, a nurse practitioner from Pedia, a well-child clinic located next door to the WIC clinic. She encouraged the graduates in their work and expressed a willingness to work with them at Pedia.

The graduates were WIC moms Cathy Coronado, Jo Johnson, Mary Keith, Elizabeth

Rodriguez, Bernadene Smith (also a WIC clerk), and Nancy Whistler. Since the beginning of the year, all six have been serving as breastfeeding peer counselors for Project 67.



Cathy Coronado, left, Jo Johnson, Mary Keith, Elizabeth Rodriguez, Bernadene Smith, and Nancy Whistler graduated in December from Project 67's first class that trained breastfeeding peer counselors in Corsicana.

Project 48

Harris County honors WIC employees

Seven employees of the nutrition-services division at the Harris County Health Department were named ESTEAM award winners at the local health department's Holiday Awards Luncheon held in December. Six of the seven winners were Project 48 WIC employees.

ESTEAM award honorees are chosen by their peers for their superior job performance, positive attitude, cooperation with management, and dedication.

The following individuals were selected: Bridgette Barrera, La Porte nutrition assistant; Elisa Camanag, South Houston nutritionist; Nina Gonzalez, Northwest Assistance Ministries clinic nutrition assistant; Kelly Greco, Baytown nutritionist; Sharon Inman, nutrition technician with the chronic-disease section; Gloria Ramirez, Southeast clinic site supervisor; and Margaret Rodriguez, Antoine nutrition assistant.



Charlie Cunningham, left, presents safety awards to Bridgette Barrera, Carloyn Perez, Clementine Young, Tammy Williams, Audrey VanWright, and Gay Crain. Not pictured is Gloria Ramirez.

Safety awards

Charlie Cunningham, human-resources director at the Harris County health department, also cited seven WIC staff members for working more than five years each without a lost-time injury.

To show appreciation for each employee's safety awareness, he presented safety awards to Project 48 staffers Bridgette Barrera, Gay Crain, Carloyn Perez, Gloria

Ramirez, Audrey VanWright, Tammy Williams, and Clementine Young.

Employees of the quarter

For the third quarter of last year, Project 48 named Felicia Sanchez, nutrition assistant at the Baytown clinic, as employee of the quarter.

Fellow employees who nominated Sanchez for the quarterly award described her as an exceptional co-worker with a very upbeat personality and a positive attitude. She was cited for her friendliness, caring, and intelligence.

Gloria Ramirez, site supervisor for the Southeast WIC clinic, was named as the employee of the quarter for the fourth quarter of last year.

Ramirez was described by those who nominated her as a very supportive, caring, and understanding person who is well-respected and quite knowledgeable about WIC policies. She was cited for her excellent organizational skills, high working standards, exceptional leadership, and overall professionalism.



Sharon Inman, left, Gloria Ramirez, and Bridgette Barrera display their ESTEAM awards. Not pictured are Elisa Camanag, Nina Gonzalez, Kelly Greco, and Margaret Rodriguez.



Project 33

El Paso WIC celebrates 20 years of service

When the El Paso City-County Health WIC program started in 1976, three employees at Project 33 served a caseload of 1,000 clients.

Today, 134 staff members serve 47,000 participants a month, operating on a budget of \$5 million.

To celebrate its 20 years of service, Project 33 held an open house in December and created exhibits explaining the program and how it has evolved since 1976. The *El Paso Times* newspaper covered the event.

The local agency's clients receive services in 33 clinic sites and two mobile clinics.

Project 33 has served as a pilot site for several statewide initiatives, including the conversion to an automated food-voucher



Donna Seward has directed Project 33 in El Paso for the past 15 years.

system, the Farmers' Market project, the Child-Friendly Clinic Initiative, and the use of software for patient-flow analysis.

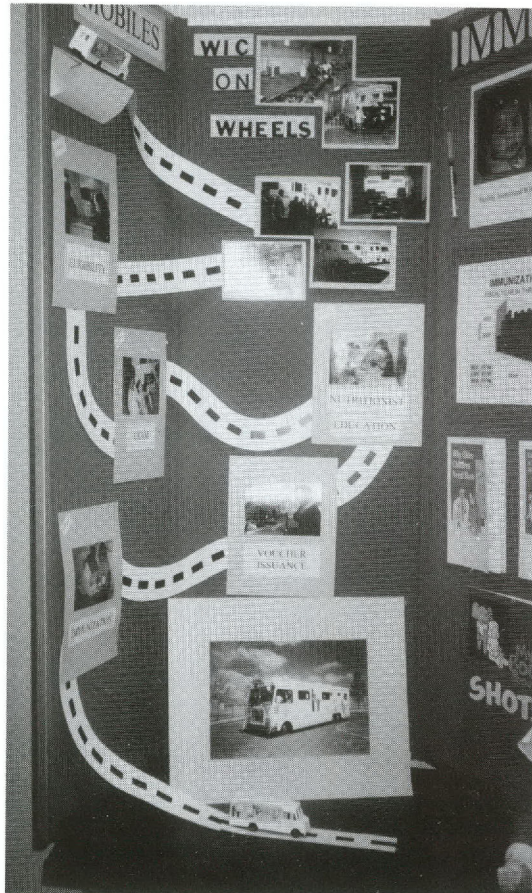
The local agency has had three WIC directors: Christy Farley, from October 1976 to October 1980; Ginger Blackwell, from November 1980 to September 1981; and Donna Seward, from October 1981 to the present.

Highlights in history

Project 33 first implemented monthly nutrition classes for parents in 1977. In 1983, clients were grouped in classes based on age, and specialized topics were taught to each audience.

The next year, WIC children at Project 33 began receiving their own nutrition-education classes, developed specifically for children. In 1985, nutritionists were added to the staff to expand locally developed curriculum and to provide new services to clients.

By 1994, clients could choose from 11 different classes. Eight new discussion lessons on topics



At its 20-year open house, Project 33 displayed exhibits about some of its innovative ideas.



WIC's variety of food packages are displayed in this exhibit at Project 33's celebration of 20 years of service.

requested by WIC clients were developed and implemented in 1995, when Project 33 received an award from the El Paso Dietetic Association for presenting the most varied nutrition-education activities to the most people.

Last year, WIC nutritionists at Project 33 began offering individual counseling for clients meeting selected nutritional criteria. About 550 to 650 clients a month are receiving this individual counseling.

Breastfeeding promotion was added to nutrition classes in 1991, and a trained breastfeeding educator joined the staff the next year.

In 1994, Project 33 trained eight WIC moms as breastfeeding peer counselors to work part time.

All eight became full-time staff members last year.

In 1993, Project 33 added L.V.N.s to the staff and began offering immunizations to WIC participants and their siblings. The El Paso WIC program now offers immunizations at 18 of its 33 clinic sites.

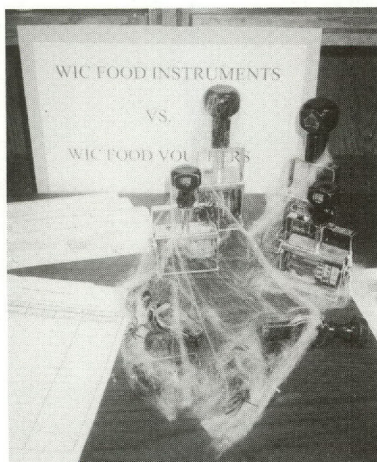
.....
 : *Project 63*

: **WIC children given toys**

: Hardin County residents, WIC staff
 : members, and WIC clients donated more
 : than 1,000 new and used toys to give to
 : participants' children during the holiday
 : season.

: "This is something we started seven
 : years ago, and it has grown every year,"
 : says Jackie Anders, Project 63's outreach
 : coordinator. "We gave away all but a
 : handful of the toys. We gave the remain-
 : ing toys to Christian Care, a local charity
 : organization."

: Anders says that donating toys to
 : local children is something
 : Project 63 does to help
 : their clients feel good
 : during the holiday
 : season and to try to
 : ensure that "every-
 : body has a good
 : Christmas."



This exhibit at Project 33's open house shows how things used to be done in the past two decades.



Project 83

Turkeys the prize in Presidio expansion drive

In an effort to increase the number of its participants, the Presidio WIC clinic held a drawing for two turkeys in December.

During September, October, and November, staff members had distributed about 150 WIC "rainbow" brochures to each participant to give to friends or relatives not on the WIC program.

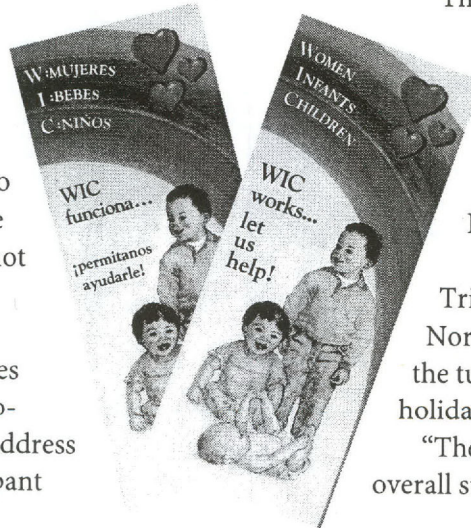
When new clients applied for WIC services and presented their brochures, the name and address of the referring participant

were added to the drawing. About 50 clients were entered into the drawing.

"The turkeys were generously donated by the two local grocery stores, MB's and Baeza's," says Betty Lewis, L.V.N.

WIC moms Trinidad Tercero and Norma Hernandez won the turkeys in time for the holidays.

"The promotion was an overall success," Lewis says.



Project 11

Effective Jan. 28, the WIC program manager's name at Project 11 in Galveston County has been changed to Sharon Barb.

Project 26

Project 26 opened three new WIC clinics in September and December. The mailing address for all three clinics is:

City of Houston Health and Human Services
8000 N. Stadium Drive
Houston, Texas 77053

1. On Sept. 1, the Eastwood WIC Center at 412 Telephone Road in Houston started serving clients from 2 p.m. to 6 p.m. on Sundays.

2. On Dec. 4, the Sharpstown site at 6700 Bellaire in Houston started serving clients from 8:30 a.m. to 5:30 p.m. on Mondays, Tuesdays, and Fridays and from 10 a.m. to

7 p.m. on Wednesdays and Thursdays. The phone number is (713) 778-2630.

3. On Dec. 2, La Nueva Casa at 1809 N. Main in Houston started serving clients from 8 a.m. to 5 p.m. on Mondays, Tuesdays, Thursdays, and Fridays and from 10 a.m. to 7 p.m. on Wednesdays. The phone number is (713) 794-9090.

Project 62

Carla Rhodes, L.V.N., became new director at Project 62 in Paris on Jan. 27, replacing retired director Barbara Francis.

Project 91

In October 1995, Virginia Olguin replaced Carmen Jimenez as WIC clerk at Project 91 in Dallas County.

WIC News Editor
1212 McLaughlin Lane
Houston, TX 77000

US MAIL

WIC News Editor
Texas Dept of Health
1000 W. 99th Street
Austin, TX 78756

LETTERS
TO THE EDITOR

WIC mom supports breastfeeding

Margaret Sapien, WIC director at Project 45 in De Leon, received this letter from a WIC mom.



Kelan Verette, a breastfed WIC baby, stays healthy.

Dear WIC,
My name is Jennifer Verette, and I support breastfeeding mothers. I am a mother of two beautiful, healthy children, and am proud to be a nursing mom. There has been so much criticizing concerning my nursing, not only from strangers and friends, but also from family members. It is not exactly "the thing to do" in either my or my husband's family. I even feel like it was resented for a while and even an embarrassment for some, but I stood firm on the matter, and kept on, knowing this was best for my baby.

I nursed both my children, and now my youngest is 8½ months. Yes,

.....

Former WIC mom appreciates Project 53

Connie Trevino at Project 53's Atascosa (RHI) Health Clinic in Pleasanton received this letter from a former WIC mom.

To the WIC staff,
Thank you for providing such a valuable service for me and my family when we needed it most. I am fortunate now in that I no longer need to rely on these services, but I appreciate all that you all have done for us.

Most sincerely,
Cheryl, Josh, and Carolyn Garcia
Pleasanton, Texas

the next question usually asked is, "How much longer are you going to do that?" And my answer is, "Until he is a year old."

My child has never had a bottle and takes a cup happily. When I do wean him, it will be over with.

My son weighs 30 pounds now, and my husband and I are proud of every pound. Oddly enough, our families are very supportive of nursing now, after seeing what it has done for my son, and my husband doesn't see how anyone could do it any other way.

Thank you,
Jennifer Verette
De Leon, Texas

.....

5-year-old sends a thank-you note

Joe Ellen Ticknor, WIC director at Project 10 in Sherman, received this letter "written" by a former WIC participant.

Hi,
My name is Sunny Pierson and I am now 5 years old. I'm too old to come to WIC anymore and thought I would tell you I miss you. When we drive by your building, I say, "Hi, WIC," and "Bye, WIC."

I wanted you to know how much we enjoyed my first five years with you. My dad and I learned a lot about nutrition and hygiene from you.

Thanks to you, on my first day of school, I didn't have to go get anywhere from five to nine shots, as some of my friends were. It made my entry into school much more enjoyable.

Thanks again,
Sunny Pierson
Sherman, Texas

Training ensures WIC process works smoothly

By Linda Brumble, M.A.
Training Coordinator

When I became coordinator of the training section in early December, I had no idea what a vast array of skills were necessary to ensure that WIC clients were certified and issued food vouchers correctly. Certification and issuance must both be done in a customer-friendly manner that guards clients' civil rights. The manner must ensure that clients can then take their food

vouchers to authorized vendors who would redeem them properly and later get fully reimbursed.

Although I had worked at Texas WIC for 11 years as both a local-agency monitor and a vendor monitor, and then for three years as a trainer, I had never really stopped to consider the complexity of the jobs in our program. The training for all of them must therefore also be varied and complex.

Addressing varied training issues

The job of our training section is to address all of the training issues surrounding those complex jobs. These issues are presented to us daily by our customers, who include the income clerk in Dallas, the WIC director in Alpine, the grocery-store owner in Harlingen, the nutritionist in Amarillo, and ultimately, the Texas WIC client.

In the next year, we in the training section hope to create, prepare, produce, and publish a variety of training materials in various formats. These new materials are designed to meet the training needs identified in requests, in individual trainings, and in a needs-assessment survey completed last year.

We will also offer a variety of new courses addressing gaps in our current training. The courses will be taught by members of our training staff, either upon request or from a published schedule. Our long-standing course offerings will be enhanced, and some will be offered through satellite programming.

The Covey series will be broadened to include a one-day renewal course. Patient-flow analysis, or PFA, the newest addition to the training section, will schedule review courses and beginning classes for new local agencies and clinic coordinators. And our newest facility, the Dallas

Regional Training Center, will swing into action, offering on-the-job training for new WIC employee recruits as well as a full schedule of other classes from Covey to customer service to PFA to CPA training.

Cost savings through training

Why so much attention to training? Studies show how a well-trained staff works not only more efficiently but also more effectively. For a Texas WIC local agency, this means a staff that performs error-free certifications and provides excellent customer service.

Training produces a more empowered work force that receives fewer client complaints. Together with the indirect benefits of less employee turnover and reduced employee burnout, training thus means cost savings in both the short term and long term.

New monthly column

Beginning next month with an overview of currently available trainings, this "Training Express" column in *Texas WIC News* will feature what's new in the training section. This includes not only new classes, but also new additions to the video library and newly developed modules.

As the section's new coordinator, I know that I speak for all of the members of the training section when I say that we are looking forward to an exciting year working with all of the clients who make our jobs rewarding and fun. As always, we welcome any suggestions, ideas, and comments about your training needs. Just call us at (512) 406-0740.



Texas WIC video library provides training solutions to local agencies

By Judith Cayton Devin
Training Specialist

You're a Texas WIC local-agency director, and you've just realized that you haven't done the required annual training in customer service or civil rights for your staff.

Time is running out. What are you going to do?

Don't panic. There's a quick and easy solution: the Texas WIC video library, a set of tapes purchased by WIC and held for WIC-only use in the TDH Audiovisual Library. There are multiple copies of most titles, so it's easy to find one available to meet your training needs. Most tapes come with clear leader guides to help you make your training a success. Call the TDH Audiovisual Library at (512) 458-7260 to check out one of the many videos available.

Here is a brief overview of current holdings. Check *Texas WIC News* for new titles because new videos are added frequently.

Customer service

Basic Basic Telephone Skills (17 minutes; No. 5938) — An introduction to the essentials of managing the telephone effectively and providing superior customer service. Presents specific examples of effective telephone skills, including 10 basic tips for improving service on the telephone.

Five Forbidden Phrases (18 minutes; No. 5936) — The telephone "doctor" has picked out the five most frustrating phrases that the public objects to in telephone conversations or in face-to-

face situations. This video offers cures to help eliminate these turn-offs.

How to Handle theirate Caller (10 minutes; No. 5937) — No one enjoys receiving a barrage of complaints from unhappy clients. This comprehensive training video highlights tips and ideas on how to handle the irate, angry, rude, and sometimes abrasive caller.

How to Deal with the Foreign Accent (10 minutes; No. 5940) — This program explains that all callers are equal and shows practical techniques that can make communications easier with foreign-language customers.

Proactive Customer Service (20 minutes; No. 5941) — Are your staff members passive, average, or proactive? This presentation illustrates the importance of building rapport with customers, giving on-the-phone and in-person examples.

We are Customers to Each Other (9 minutes; No. 5939) — Most people are aware of the importance of providing good service. But is there a distinction between the level of service you give to internal customers and to external customers? This video helps you increase the level of service inside the walls of your organization.

Quality in the Public Sector (24 minutes; No. 6241) — This video shows public employees how to create satisfied customers in everyday encounters. In a dream sequence that takes place in various

government settings, employees learn how to shift the focus to what can be done (not what can't), how to use facts to help customers let off steam, and how to ask questions and give undivided attention.

You're not Listening (19 minutes; No. 5972) — A series of vignettes identifies poor listening habits and demonstrates how the six essential skills for good listening can help anyone overcome distractions, boredom, disinterest, and jumping to conclusions.

Civil rights

The Cost of Intolerance (20 minutes; No. 6043) — This video shows the price paid by organizations for intolerance toward customers from diverse backgrounds. A series of vignettes illustrates how these customers get the message that they are not valued. It examines the subtle and sometimes not so subtle biases and stereotypes that affect behaviors.

A Winning Balance (17 minutes; No. 6042) — This interactive training video helps participants identify their personal attitudes and behaviors toward differences with others. This video may generate heated discussion. It is a frank and open look at differences of individuals and should be led by someone comfortable in the role of neutral facilitator.

Miscellaneous staff training

Defusing Hostility (45 minutes; No. 6007) — This video shows how to manage anger in the workplace and examines specific skills needed to restore calm to angry situations. Realistic examples are shown of hostile situations, with two experts explaining causes and resolutions.

Baby's first food can influence vision, intelligence, motor development

By Nancy Liedtke, M.S.

Breastfeeding Promotion Nutritionist

Does a baby's first food really make a difference in the development of his or her intelligence and eyesight? A growing number of articles and research studies say yes.

There's strong evidence that premature and full-term infants fed breastmilk have better development outcomes than those of formula-fed babies.

Photo by Jennifer VanGilder



Researchers found that breastfed children score higher on IQ tests.

Vision

Several studies, some of which are outlined in Ricardo Uauy and Isidora De Andraca's 1995 review article in *Journal of Nutrition*, have found that breastfed pre-term infants perform better on vision tests early in life and up to the age of 3 years. Formula-fed premature babies don't seem capable of catching up on visual-development tests. This may mean a permanent deficit for these children.

The findings on premature infants have led researchers to investigate the effect of infant-feeding methods on full-term infants. The results from many of those studies also indicate significantly higher vision scores among full-term breastfed babies in the first few months of life, but it's unclear if this is a long-term benefit.

Intelligence, motor skills

Infant-feeding methods are just one of many factors associated with intelligence. Studies indicate that breastfed pre-term and full-term infants score higher than formula-fed pre-term and full-term infants on tests measuring motor and cognitive skills during the first four years of life.

Alan Lucas, a researcher at the Dunn Nutrition Unit and University in Cam-

bridge, England, has conducted a number of studies relating infant-feeding methods to intelligence. One of his studies of 300 children found that 8-year-olds who had been premature infants and fed human milk scored eight points higher on IQ tests than did their formula-fed counterparts.

What's in mom's milk?

Fat is an important nutrient throughout life, especially for a growing child. Two fats, docosahexaenoic acid (DHA) and arachidonic acid (AA), are needed for the retina of the eyes, tissue in the brain, and lining of nerves and arteries. Humans get these fats either by eating them or by making them in their body from other fats (linolenic acid and linoleic acid).

Breastmilk contains DHA and AA; formula doesn't. Even though formula-fed babies get enough overall fat, they seem to be unable to make enough DHA and AA to give them fat profiles similar to breastfed babies. Studies consistently show breastfed babies to have higher levels of DHA and AA in their blood and tissues than formula-fed babies have.

To date, there are no published studies showing that babies fed commercial infant formulas can catch up to the levels of DHA found in breastfed babies. This has led researchers to study whether DHA and AA fats in an infant's diet are essential to optimal development. Because it is still unknown if low

levels of DHA in an infant's diet will have permanent effects, it is important for parents to know about this issue so that they can make an informed decision about the method of infant feeding they choose for their child.

DHA and development

In 1996, the journal *Lipids* published three articles about the different fat profiles found in breastfed and formula-fed babies. These studies and others found that breastfed babies have higher DHA levels as well as higher visual-development scores and mental-development scores than those of formula-fed babies.

Scientists believe that fats, especially DHA, are a *partial* explanation for the developmental differences seen in infants fed human milk vs. formula. Since the mid-1970s, some scientists have been suggesting that optimum brain and visual development can be achieved by adding DHA and AA to the diets of term infants, low-birthweight infants, and especially pre-term infants.

Currently, breastmilk is the only infant food available in the United States that contains DHA and AA.

Future forecast

"Human milk is such a complex substance," says David Rassin, professor of neonatology and director of the Laboratory of Developmental Nutrition and Metabolism at the University of Texas Medical Branch in Galveston. "Formula companies can't just add DHA and AA fats to their formulas. They have to design products that will be stable, pure, and safe as well as effective. They also will have to

study how much of these fat products to add."

The formula companies' goal will be to mimic human milk as much as possible and to produce fat profiles in formula-fed infants that better match those of breastfed babies.

Rassin speculates that the Food and Drug Administration will be asked to review a report this year on whether infant formulas should contain DHA and other fats. However, the FDA will also have to consider if available fat products are suitable for infant formulas and if these fat products can pass the FDA approval process before their inclusion in formulas can be required.

If formula companies are required to add DHA, a possible ingredient in future formulas could be oils from fish or certain algae. Future formulas also could contain oils rich in AA, such as primrose oil or oils from fungi. Until that time,

- ◆ Formulas will lack both DHA and AA.
- ◆ Formula-fed babies will have lower levels of these important fats in their bodies.
- ◆ Because of various factors including the absence of DHA in their diet, formula-fed babies — especially premature babies — will continue to be at risk of not achieving their optimal visual and mental development.

Future research is needed to uncover how infant development is



Test scores on motor skills were found to be higher for breastfed infants.

affected by other factors, such as compounds not yet discovered in human milk and the stimulus received from breastfeeding.

References

Twenty-seven sources were used in writing this article. Below are four major references on the subject:

- Crawford, M.A. "The Role of Essential Fatty Acids in Neural Development: Implications for Perinatal Nutrition," *American Journal of Clinical Nutrition*, 1993, Vol. 57 supplement, pp. 703-710.
- Florey, C., Leech, A. M., and Blackhall, A. "Infant Feeding and Mental and Motor Development at 18 Months of Age in First Born Singletons," *International Journal of Epidemiology*, 1995, Vol. 24 (Issue 3), p. S21-S26.
- Jørgensen, M. H., et al. "Visual Acuity and Erythrocyte Docosahexaenoic Acid Status in Breast-fed and Formula-fed Term Infants during the First Four Months of Life," *Lipids*, 1996, Vol. 31 (Issue 1), pp. 99-105.
- Uauy, R. and De Andraca, I. "Human Milk and Breast Feeding for Optimal Mental Development," *Journal of Nutrition*, 1995, Vol. 125 supplement, pp. 2,278-2,280.

State agency field-tests posters for World Breastfeeding Week

By Laurie Coker
Breastfeeding Promotion Specialist

“Breastfeeding — Nature’s Way” has been designated as the official theme for worldwide activities to promote breastfeeding during World Breastfeeding Week,

Aug. 1-7. The theme, approved by the World Alliance for Breastfeeding Action, emphasizes the ecological benefits of breastfeeding.

Texas WIC is developing a series of posters for World Breastfeeding Week. They were field-tested in November at Project 1’s St. John’s clinic in Austin. Field-testers were offered a choice of several slogans: “Recycling Begins at Birth,” “Great Taste — No Waste!” and “First Steps to Good Health.”

Waste-free breastfeeding

One poster shows a breastfeeding family walking hand in hand along the beach, picking up litter. A WIC participant suggested the slogan, “Breastfeeding and Recycling Go Hand in Hand!”

Because we are working with other environmental agencies to promote our theme this year, this slogan was accepted as being most appropriate. We added it to our field-test survey, which was mailed to nine other local agencies.

Field-testing materials

One of the most rewarding aspects of developing WIC breastfeeding materials is reading the field-test surveys. Participants and staff provide insightful

observations that motivate state-agency staff and influence the final product.

WIC participants are sometimes reluctant to express their opinions because they think they’ll hurt our feelings. When field-testing for the state agency, encourage participants to comment frankly and to write down their own ideas and honest opinions. These materials are developed for them, and their opinion is vital to the materials’ effectiveness.

Recycled-products creations

This year, local agencies are invited to come up with their own artistic creations using recycled products. Entries will be exhibited June 11-13 at the 1997 Nutrition Education and Breastfeeding Promotion Summer Workshop in Austin.

Local agencies are also encouraged to send their ideas for recycling materials (anything from car parts to old shoes) to add to a recycling list that will be included in the *World Breastfeeding Week Activity Notebook*. This notebook, to be distributed at the NAWD conference in June, will include ideas for promoting World Breastfeeding Week.

Mail or fax your suggestions to:

Shirley Ellis
1100 W. 49th St.
Austin, Texas 78756
Fax: (512) 406-0722.



Designs of proposed seals for World Breastfeeding Week were also field-tested by WIC clients.

National Breastfeeding MediaWatch campaign gains new coordinators in 5 states

By Laurie Coker

Breastfeeding Promotion Specialist

California, Louisiana, Maryland, Massachusetts, Virginia, and Washington now have their own MediaWatch coordinators to answer the growing volume of mail from National Breastfeeding MediaWatch volunteers living in those states. The campaign, begun in 1988, is an ongoing project sponsored by the breastfeeding-promotion section of the Bureau of Clinical and Nutrition Services at the Texas Department of Health.

The purpose of the campaign is to identify references to breastfeeding and formula-feeding in television, advertising, print, radio, and film. In Texas, letters of commendation for positive references are sent by the bureau chief as well as by MediaWatch volunteers. Letters with constructive feedback and information are sent in response to negative or inaccurate references.

Volunteers believe that the media plays a major role in shaping societal views. They believe that more mothers will breastfeed when breastfeeding is depicted in the media as the natural, normal way to feed babies. Positive media coverage also can help increase support by employers and families.

MediaWatch is catching on worldwide. A pediatrician in Barcelona, Spain, plans to create a similar campaign, and Puerto Rico is also taking up the cause.

Until now, all MediaWatch mail has been directed to TDH, but if you reside in one of the six addi-

tional MediaWatch states, you can contact your state MediaWatch coordinator at the postal and e-mail addresses below:

California

Paula Bermingham
Breastfeeding MediaWatch
Coordinator
CEMRWIC
122 D Street
Lakeport, Calif. 95453
bermingp@sonoma.edu



Frances Coulter Sturgess
Breastfeeding MediaWatch
Coordinator
Family Maternal and Child
Health Services
597 Center Ave., Suite 365
Martinez, Calif. 94553
stur105w@wonder.em.cdc.gov

Louisiana

Laurie Wheeler
Breastfeeding MediaWatch
Coordinator
3408 Acorn Drive
Violet, La. 70092
llwheeler@aol.com



Maryland

Amy Kovar
Breastfeeding Promotion
Coordinator
Office of the Maryland WIC
Program
201 W. Preston St., 1st floor
Baltimore, Md. 21201
kovara@dnhm.state.md.us



Massachusetts

Julie Brill
Breastfeeding
MediaWatch Coordinator
5 Warren Ave.
Bedford, Mass. 01730
julieb@tiac.net



Virginia

Wendy Funk
Breastfeeding MediaWatch
Coordinator
17358 Wexford Loop
Dumfries, Va. 22026
wfunk@ha.osd.mil



Washington

Nancy Kramer
Breastfeeding MediaWatch
Coordinator
70 Vert Road
Port Angeles, Wash. 98363-9624
kramer@tenforward.com



To order a National Breastfeeding MediaWatch kit, contact:

Laurie Coker
1100 W. 49th St.
Austin, Texas 78756
lcoker@wicsc.tdh.state.tx.us

Shopping for nutrition education in Dallas

By Lynn Silverman, M.A., R.D.
Nutrition Education Specialist



Grocery-store tours with WIC participants have met with various levels of success at local agencies that use tours for nutrition education. At Project 7 in Dallas, nutrition-education coordinator Hazel Cattlett has developed and pilot-tested a successful new program of shoppers' tours.

The Smart Shoppers Program, a three-part set of community-based grocery-store tours, was funded in 1995 by a USDA grant awarded to the Dallas Food and Nutrition Consortium, which includes Project 7. The grant's purpose was to develop, implement, and evaluate community-based nutrition education for families with young children on food-assistance programs. Cattlett also serves as project director for the consortium.

What Dallas clients want to know

To start the new program, needs-assessment focus groups were conducted with Project 7 participants and led by state-agency outreach staffers. The focus groups showed that participants want to save money when shopping for groceries. They want to know how to select fresh fruits and vegetables. They show some interest in reading nutrition labels and in learning to cook a wider variety of nutritious foods. Recipes are disliked, but participants say that they might be willing to use them if the recipes had color pictures. Spanish speakers, primarily, want information on food freshness and food safety.

What Dallas WIC includes in the Smart Shoppers Program

Cattlett developed three tours to teach the food-guide pyramid. Tour 1 emphasizes whole grains from the base of the pyramid. Tour 2 highlights the fresh fruits and vegetables in level two. Tour 3 features lower-fat choices from among the dairy and protein foods found in the pyramid's third level.

Every tour includes information on the nutrition-facts labels, as well as unit pricing, meal planning, making shopping lists, and using coupons. Tour staffers from Project 7 conduct two taste tests on each tour. Cattlett developed a tour newsletter and printed recipes with color photographs. A brief

questionnaire at the end of each tour gives immediate feedback on how to improve the tours.

How to select and partner with supermarkets

Supermarket tours have been marketed in Dallas for years. So, to implement the Smart Shoppers Program, the Dallas Food and Nutrition Consortium made use of what has been known to work.

Members of the consortium chose large grocery chains with stores throughout the city for easier expansion, greater selections, and wider aisles. They sought stores with good community reputations and locations, and preferred those with services such as a deli that can serve as a gathering areas before a tour.

Cattlett stresses developing relationships with management and staff. She offers the following practical steps:

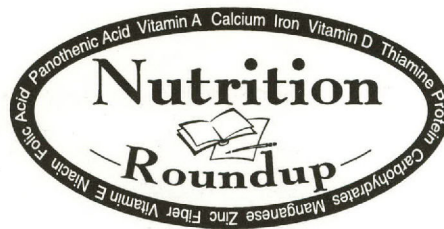
- ◆ Be visible; monitor the program frequently to avoid problems.
- ◆ Determine times of the day, days of the week, and times of the year that work best for the store. Don't plan tours near Thanksgiving, Christmas, or during evening grocery-store rush hours.
- ◆ Tell managers that you will promote store brands and use store ads. Let them know that tour participants often stay to shop.
- ◆ Show managers how tours serve as "good-neighbor activities" and build good will.
- ◆ Plan in-store promotions; use the store intercom to announce tours with additional openings.
- ◆ Provide managers with tour schedules in advance; inform them if you cancel.

- ◆ Invite the store to provide incentives, such as products for taste-testing.

Participants will more readily register and show up for tours when you:

- ◆ Give short presentations after classes in the clinic to promote the tours.
- ◆ Ask participants to give their names and phone numbers when signing up for a tour.
- ◆ Schedule their tour within the next two weeks.
- ◆ Meet at a designated place in the store.
- ◆ Limit tours to six to seven participants, especially if they bring children.
- ◆ Remember that you may need to sign up 13 people to get six commitments.
- ◆ Give participant a tour ticket and attached information sheet with a signature line for the tour guide to sign to validate attendance by the participant.
- ◆ Give participants a reminder call the day before the tour.
- ◆ Since clients make their nutrition-education contact on the tour, just schedule a simple voucher pickup for their next appointment, or consider just mailing their vouchers to them.
- ◆ Prepare two staffers for each tour; if more than six or seven people show up, split into two tours.
- ◆ Keep supplies for tours in clinic, one box for each tour.
- ◆ When the tour ends, offer the participants an opportunity to attend the next tour.

Cattlett can be reached at (214) 670-7218 to help anyone learn more about making grocery-store tours work for WIC participants.



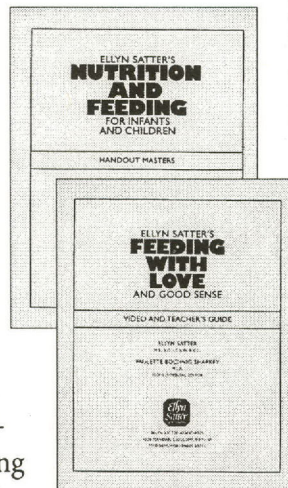
By Rachel Jule
 Nutrition Education Specialist
 and
 Mary Van Eck, M.S., R.D.
 Nutrition Education Coordinator

New lesson for picky eaters

Feeding the Picky Eater, a nutrition-education lesson plan, was sent to all Texas WIC local agencies in February. Its nutrition-education-lesson code is CF-000-13.

As noted on the lesson plan, this is a discussion-and-activity lesson based on material developed by Ellyn Sattes, a registered dietitian and author.

If you'd like to have access to more of Ellyn Satter's training materials, eight copies of a two-binder set are available from the TDH Audiovisual Library. These are wonderful tools for WIC staffers to use to become better educated about feeding young children. The first binder, "Feeding with Love and Good Sense: Video and Teacher's Guide, 1995," includes a video and written materials. The second binder, "Nutrition and Feeding for Infants and Children: Handout Masters, 1995," contains other training materials.



Texas WIC staff members can borrow the two-binder set for up to six weeks by calling the TDH Audiovisual Library at (512) 458-7260 and requesting item No. B0069.

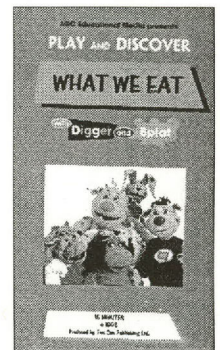
Children's video teaches food pyramid

What We Eat with Digger and Splat is a 15-minute video featuring puppets and cartoons.

Produced by the Altschul Group, it teaches children about the food-guide pyramid through songs and cartoons. Children will travel around the world with Lula and Didi in a magic toy-box ride to learn about different foods. They can also play "Race the Clock" with Digger and help Splat solve Bookworm's food riddle.

Texas WIC local agencies can borrow this video (AV No. 6272) from the TDH Audiovisual Library for a two-month period. At this time, the video is available in English only and is recommended for use in waiting rooms.

To check out a copy, call (512) 458-7260.



Peer counselors' referrals give clients the help they need

By Jewell Stremler, C.L.E.

Peer Counselor Coordinator

As a WIC mom enters the health-care and educational services available to her, a breastfeeding peer counselor is often the first

person she may see or have an in-depth interview with. The client may have

spoken to the peer counselor — and to no one else — about some of the concerns and needs held by her and her family.

In health care and social services, we call this the client's first contact person "the gatekeeper." It is an awesome responsibility, and Texas WIC breastfeeding peer counselors are doing an outstanding job.

Successes with referrals

This month's first case study was sent in by Celestine Ukaegbu, a peer counselor from Project 26 in Houston.

Ukaegbu tells about counseling a first-time mother-to-be whose concern was her diet. The pregnant woman confessed that she ate lots of junk foods and too much salt and pepper. She was afraid that she would not be well-nourished enough to be able to breastfeed. She had little money to buy food and no source of a regular food supply.

Ukaegbu reassured the mom and counseled her about the benefits of breastfeeding and her ability to make milk for her baby. "Finally, I referred my client to a WIC nutritionist and to the Texas Department of Human Services," Ukaegbu says. "Fortunately, my counseling was very rewarding because the mother came back with a smiling face and a grateful heart thanking me for referring her to WIC and to TDHS, which she claimed she never knew about."

Theresa Johnson, a peer counselor with Project 74 in Brownwood, sent a story about a mom whose baby was very sleepy and would not wake up to nurse. The mother was

concerned about the baby not getting any nutrition. Johnson immediately noticed that the baby was jaundiced, and told the mom to take the baby to the doctor. The baby was admitted to the hospital for phototherapy, or "bili-light" therapy, to combat a high level of bilirubin. The baby is now healthy and nurses very well, Johnson reports.

Peer counselor Gracy Hoffman from Project 10 in Grayson County reports helping a mother whose breasts had been engorged and who developed mastitis. The mother was discouraged and wanted to quit nursing, but Hoffman encouraged her to nurse more often and to go to the doctor. Her doctor put her on antibiotics, her mastitis cleared up, and she continued to breastfeed. "The outcome was great," says Hoffman.

Referrals a key role of breastfeeding peer counselors

One of the key roles of a WIC peer counselor is to make appropriate referrals, immediately if necessary. Local agencies with peer-counselor programs have a referral system in place so that peer counselors can feel comfortable with this important job function.

If a peer counselor sees a mom with an other-than-normal breastfeeding problem, she will refer the mom to the WIC supervisor at her clinic or to the local agency's breastfeeding coordinator. Many local agencies have a breastfeeding coordinator who is a



lactation consultant. Others have a lactation consultant on contract to help moms who need more intensive services than peer counselors can offer.

Breastfeeding coordinators sometimes refer moms in difficult circumstances to their contracted lactation consultant, a pro-breastfeeding nurse or doctor, or to a La Leche League leader, depending on the severity of the problem and the resources available in the community. Breastfeeding coordinators and peer counselors can reach the Mom's Place Breastfeeding Resource Center at (800) 514-MOMS, or (800) 514-6667.

The breastfeeding-promotion staffers at the WIC state office remain available for backup support; they can be reached at (512) 406-0744.

Peer counselors also make referrals to other community resources such as social workers and TANF (Temporary Assistance for Needy Families) offices, formerly referred to as AFDC (Assistance to Families with Dependent Children) offices.

Send more stories

We have had a wonderful response from peer counselors across the state who have sent in stories for this column. Please keep them coming. Send stories about moms you have helped, information you would like to share, or questions you have for other peer counselors. Let us know what you like or don't like about this column. We want to make it a place for peer counselors to learn and share information.

Send your stories and comments to Jewell Stremmer at the state agency. Fax the information to her at (512) 406-0722, or call her at (512) 406-0744.

March

March 12-15 — Children's Defense Fund Annual National Conference, Washington Hilton and Towers, Washington, D.C. For more information, visit <http://www.tmn.com/cdf/index.html>; write to the CDF Conference, 25 E Street N.W., Washington, D.C. 20001, or fax (202) 662-3540.

March 18 — Vendor training, Austin. Two-hour training for area WIC vendors to teach the basics of WIC-voucher redemption, WIC-allowable foods, and claims submission. Intended as a refresher for those who have attended training before and as an introduction for new WIC-vendor employees and managers. For more information, call John-Paul Morgante at (512) 406-0740.

March 20 & 21 — "Women, Children, and Addiction," a one-day seminar, offered twice in two days, on fetal alcohol syndrome, Austin. No charge. Sponsored by TDH. Addresses working effectively with women at high risk of having children affected by alcohol or drug abuse. 6.2 CEUs usually available. For more information, call Mary Ethen at (512) 458-7232.

March 25-26 — Patient Flow Analysis II, Dallas. Instruction for analyzing PFA study results and putting solutions into effect in the clinic. Available only to attendees who have completed study for analysis. For more information, call Carol Filer at (512) 406-0740.

March 25-27 — Competent-professional-authority orientation, Austin. Three days of training covering screening techniques, breastfeeding promotion, high-risk conditions, allowable foods, formula determination, nutrition education, counseling, outreach, and civil rights. For more information, call Liz Bruns or Anita Ramos at (512) 406-0740. To register, call Dawn Everett at (512) 406-0740.

March 25-27 — Intensive Course in Breastfeeding, Phase I, San Antonio. This three-day course is designed to prepare health-care providers to promote and support breastfeeding. Cost is \$45. For more information, call Missy Hammer at (512) 406-0744.

March 26 — Lactation Management Workshop for Physicians, San Antonio. Four-hour workshop designed to improve physicians' skills at managing breastfeeding problems and special circumstances and assessing medications for nursing mothers. Cost is \$15. For more information, call Missy Hammer at (512) 406-0744.

April

April 1 — "First Things First," UT Health Science Center, Houston. A one-day class focusing on the life-management and time-management lessons from Steven Covey's *Seven Habits of Highly Effective People*. For more information, call any member of the Texas WIC training staff at (512) 406-0740.

April 6-9 — "Connecting for Children — Thinking Outside the Box," 17th annual conference sponsored by the Regional Network for Children, Omni Southpark Hotel, Austin. For more information, call Liz Nowicki at (512) 445-5999.

April 7-10 — "Stephen Covey's Seven Habits of Highly Effective People," Houston. This three-and-a-half-day course invites attendees to examine their effectiveness in personal and professional areas. For more information, call any member of the WIC training staff at (512) 406-0740.

If you know of an event you'd like to include in this calendar, call Shelly Ogle or Callie Jones at (512) 458-7532.

THE SEVEN HABITS OF HIGHLY EFFECTIVE PEOPLE

Covey Leadership Center

Final article in a series

Make a habit of being highly effective

By Judith Cayton Devin
Training Specialist

This is the last article in a series related to the course based on Stephen Covey's *Seven Habits of Highly Effective People*. The objective of the series was twofold: to remind those of you who've taken the course of the principles you learned and to introduce those principles to those of you who haven't attended the course.

As graduates often write at the end of the course, the principles are much easier to *understand* than they are to *practice*. Incorporating them into daily life is difficult, so we advise students to take it in small steps. Just work on one habit at time.

The goal, of course, is to become a more effective person by integrating these habits into your daily actions. Covey describes it as aligning our lives with our principles.

I want to encourage the course graduates to revisit their experience in the course. Pull out (and maybe dust off!) your course materials. Read over your mission statement. Does it still reflect what you want your life to be about?

Consider your weekly planning — are you putting the big rocks first?

Look particularly at the action plans and goals you set for yourself. Give yourself a pat on the back for the progress you've made, but don't get discouraged by the areas where you've gotten stuck. Simply

recommit to continue to become more effective.

Create new goals. What's the next habit you would like to work on? Consider getting a partner who has also been through the class; share your goals and struggles together.

To help you in your efforts, the state-agency training section will soon begin offering a one-day renewal session for Covey course graduates. This Seven Habits Advanced Applications renewal session will offer an opportunity to revisit the Covey habits and recommit to the principles.

For those of you who haven't taken the course, look at the course list at left for one of the courses scheduled throughout the state this year. Or, if your local agency — and perhaps a neighboring local agency — can gather a group of 15 or more students, we will schedule a class in your area.

Covey is no magician, and his seven habits aren't magic. They are based on common sense, and they don't work unless you make them work. Decide to become a highly effective person.

1997 Covey courses

The schedule of Texas WIC's Covey courses for 1997 is shown at left. It is not complete.

Please call the Texas WIC training section at (512) 406-0740 for additional training dates. Local agencies should watch their mail for the arrival of a complete training calendar.

1997 Covey courses

- April 1, UTHSC, Houston
First Things First
- April 7-10, Houston
Seven Habits of Highly Effective People
- April 17, Sherman
First Things First
- April 30, Dallas
Seven Habits Advanced Applications
- May 2, Temple
Seven Habits Advanced Applications
- May 5-8, Austin
Seven Habits of Highly Effective People
- June 2, San Antonio
Seven Habits Advanced Applications
- June 16, El Paso
First Things First
- June 23-24, Dallas
Seven Habits of Highly Effective People
- July 1, Fort Worth
First Things First
- July 17, Midland
Seven Habits Advanced Applications
- Aug. 4-7, El Paso
Seven Habits of Highly Effective People
- Aug. 8, El Paso
Seven Habits Advanced Applications
- Aug. 21, Dallas
First Things First
- Oct. 6-9, San Antonio
Seven Habits of Highly Effective People
- Oct. 14, Dallas
Seven Habits Advanced Applications
- Dec. 1-4, Rio Grande Valley
Seven Habits of Highly Effective People

Researchers link mumps to heart damage

By Marie Garland, R.N.
WIC Immunization Coordinator



All of us involved in providing immunization services frequently field calls from parents, citizens, and even other medical professionals about the necessity of getting childhood immunizations. The

caller usually says something like, "Well, I had the mumps as a child, and I didn't have any bad effects. What's so bad about my child getting the mumps?"

Fortunately, we are on the brink of major revelations and discoveries about how illnesses and environmental factors have long-term effects on our bodies. Recent strides in genetic modeling and gene mapping have brought some astounding new facts to light.

Viruses can infect heart tissue

For the first time, researchers have shown that the virus that causes mumps can also infect and damage a child's heart, resulting in heart failure and death.

Although better vaccination means that fewer people will become infected with the mumps virus, researchers suspect that other common viruses that cause respiratory infections may also attack heart tissue, according to the American Heart Association's January 1997 issue of *Circulation*.

"It may be worthwhile investing in vaccinations against those viruses, too, if it saves young children's hearts," says lead study author Jeffrey Towbin, M.D., in a statement released from the AHA. Towbin is an associate professor of cardiology at the Baylor College of Medicine in Houston.

The study

Towbin's team of researchers looked at heart tissue from 29 patients, ages 26 weeks to 7 years, who had died of endocardial fibroelastosis (EFE) between 1955 and 1992. In EFE, the heart lining thickens, impairing the heart's ability to pump.

The researchers found that more than 70 percent of the patients' hearts contained genetic material from the mumps virus. Twenty-eight percent had evidence of adenovirus, a common virus that causes respiratory, eye, and gastrointestinal infections.

Overall, 90 percent of the patients were positive

for at least one of the viruses tested, which included mumps, cytomegalovirus, adenovirus, enterovirus, herpes simplex virus, and influenzae A. In contrast, only one of 65 control samples was infected with a virus.

During a viral infection, there is a period when the virus is circulating in the blood. Some viruses, such as adenoviruses, leave the bloodstream and enter heart muscle. Infected heart muscle cells can lose their ability to work normally.

While EFE was once relatively common, occurring in one of every 5,000 births, cases have declined sharply. The Towbin study provides evidence to support what many have suspected: EFE cases have dropped because fewer children are becoming infected with the mumps virus.

In the study, almost all of the heart samples obtained before 1980 had the mumps virus. But after that time, none were infected with the virus, most likely because of increased availability of the mumps vaccine, says Towbin.

Long-term effects

Nobody really knows how common it is for viruses to cause heart problems, Towbin says. Adult hearts may also be affected. Studies are now under way to determine how the mumps virus may be related to adult heart disease, particularly in those ages 40 and older.

Towbin noted that the death certificate for Reggie Lewis, the Boston Celtics basketball player who died suddenly in 1993, listed his cause of death as being inflammation of the heart due to adenovirus infection.

As the research indicates, childhood vaccinations may indeed have long-term positive health implications beyond just the avoidance of a childhood disease.

Et cetera

By John Koloen
Staff Writer

We're eating more fruits, but also more high-fat foods

Americans are eating more fruits and vegetables than they did in 1970, but they're also eating more high-fat, high-calorie foods, according to a report by the USDA.

The report, *Food Consumption, Prices and Expenditures*, is based on dividing the amount of food in the market system by the total U.S. population. The report is based on 1994 data.

The good news is that average Americans now consume 63 more pounds of vegetables and grains and 49 more pounds of fruit per year than they did in 1970. The bad news is that most of the increase in consumption of grains is in the form of such mixtures as pizza, pasta, and snacks, rather than in high-fiber products.

Other findings include:

- ◆ Poultry consumption has increased while red-meat consumption has decreased. Poultry accounted for one-third of meat consumed in 1994, up from 19 percent in 1970. Meanwhile, red meat dropped to 59 percent from 74 percent in 1970.
- ◆ Whole-milk consumption plunged while consumption of skim and 1 percent milk increased. Overall milk consumption decreased by seven gallons per person since

1970. However, milk-fat intake increased as Americans consumed 53 percent more cheese in 1994 than in 1970.

- ◆ From 1980 to 1994, intake of refined and processed sugar increased 20 percent, to 148 pounds per person per year. Per capita candy consumption nearly quadrupled during the same period, from six pounds annually to more than 22 pounds.
- ◆ Annual consumption of beer increased by an average of four gallons between 1970 and 1994. Also during this period, consumption of carbonated beverages surged 43 percent.

Source: *Nutrition Week*

Tips for handling stress

Is stress hampering your life? Your best bet to handle it is to confront it head-on.

"Most stress-related problems won't go away until you deal with the cause," says Dr. Ernest Fruge of the Baylor College of Medicine in Houston.

He recommends identifying people and situations that contribute to your stress. Often, relationships with family members or co-workers are the problem.

Fruge suggests meeting with the relative or colleague, giving everyone a chance to express feelings

and ideas and to suggest solutions.

"Any plan for coping with stress is experimental," Fruge says. "If the proposed changes don't lessen the stress, meet again to figure out other options."

If you cannot identify and remedy the causes of stress, see a counselor or family physician.

Most low-income women use contraceptives

Eight in 10 sexually active, low-income women use reversible contraceptives, according to a new study by the Alan Guttmacher Institute. The study is based on a 1995 survey of 1,852 white, black, and Hispanic women ages 18 to 34 with family incomes below 200 percent of the poverty level who were at risk of an unplanned pregnancy (and not relying on sterilization).

Low-income women are more likely to practice contraception if they have positive attitudes toward its use and if they are satisfied with their most recent gynecological visit, says the study.

Three-quarters of pregnancies to low-income women are unplanned, compared with half of those to higher-income women.

Positive feelings toward contraception make a difference in use. The study shows that low-income women are more likely to use contraceptives if:

Using evaluation techniques to prove that your program works

By Carol Filer, M.S., R.D., L.D.
Clinic Management Specialist

- ◆ They think that contraception really matters in determining whether someone gets pregnant.
- ◆ Their friends think that contraceptive use is important.
- ◆ They talk frequently about relationships and contraception with their girlfriends and partners.

Usage is also high among women who feel strongly that they do not need their partners' approval for contraceptive use.

The study, "The Family Planning Attitudes and Experiences of Low-Income Women," by Jacqueline Darroch Forrest and Jennifer J. Frost, profiles low-income women's perceptions of and experiences with contraceptive methods and contraceptive providers. It appeared in the November/December 1996 issue of *Family Planning Perspectives*, a peer-reviewed bimonthly journal published by the Alan Guttmacher Institute, a non-profit organization for reproductive-health research, policy analysis, and public education.

In these times of reform and accountability, effective evaluation is critical in justifying, improving, and continuing our programs. The dictionary defines evaluation as an action "to determine the significance or worth of [a thing], usually by careful appraisal and study."

In performing evaluation of your programs, you must make decisions on focus, scale, time frame, and point of comparison.

Focus

Do you want to focus on outcomes, effort, process, and efficiency? To what extent has your program accomplished the outcome or outcomes that you are seeking? In terms of effort, what resources were used and how many participants were served?

Focusing on process is looking at what happened along the way and what methods were used to get to your result. Efficiency involves looking at the outcomes achieved vs. the effort involved.

Scale

When considering scale, you must decide how big an effort is appropriate.

Will a routine effort incorporated into current programs suffice? Will a fairly low-key observation be enough, or is a major effort needed which could involve special data collection, additional staff, and a formal report?

Time frame

Time frame involves the length of time needed for the evaluation.

You may have ongoing systems that give continuous feedback or long-term follow-up, or a combination of the two.

Point of comparison

There are several ways to do a point of comparison. You can compare your program outcomes to the situation without the program, or you might look at your program outcomes in relation to earlier outcomes of the same program.

Other comparisons you could make are comparisons with the agency goals or comparing your program's effectiveness to the effectiveness of other programs that are similar to yours.

All of the above are items to consider when you are setting up a program evaluation. In making decisions, remember that each program is unique. A number of combinations of the above items may work for you.

Remember, there is no single right answer.

The challenge for you is to use your creativity to find and implement the best combination for each program's situation.

Source: Achterberg, C. and Parham, E. "Prove Your Nutrition Education Program Works," American Dietetic Association Annual Conference, Oct. 1996.

Eat 5 Fruits and Vegetables Every Day.



NATIONAL
CANCER
INSTITUTE



1-800-4-CANCER

(1-800-422-6237)

TTY: 1-800-332-8615



WIC, Bureau of Nutrition Services

Texas Department of Health

1100 W. 49th St.

Austin, Texas 78756

Bulk Rate
U.S. Postage
PAID
Austin, Texas
Permit No. 28

ADDRESS CORRECTION REQUESTED